(070) Urban Rate Comparability Certification Compliance	FCC Form 690
	American Albert ONAR
	Approved by OMB
	OMB Control No. 3060-1185
	Depot of G
	Page 4 of 8

<010>	Study Area Code	278011
<015>	Study Area Name	Central Louisiana Cellular, LLC
<020>	Program Year	2017
<030>	Contact Name - Person USAC should contact regarding this data	Chad Strausbaugh
<035>	Contact Telephone Number - Number of person identified in data line <030>	6105356474 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	cstrausbaugh@cellonenation.com

TO BE COMPLETED BY THE REPORTING CARRIER, IF THE REPORTING CARRIER IS FILING CERTIFICATION DATA ON ITS OWN BEHALF:

C	ertification of Officer or E	Employee as to Compliance with 47 (CFR §54.1009(a)(4)
I certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring compliance with 47 CFR §54.1009(a)(4), the information reported on this form and in any attachments is accurate.			
Name of Reporting Carrier: Cent	ral Louisiana Cellular, I	TC	
Signature of Authorized Officer:	CERTIFIED ONLINE		Date 06/28/2017
Printed name of Authorized Officer:	Chad Strausbaugh		
Title or position of Authorized Officer:	Staff Counsel		
Telephone number of Authorized Officer:	6105356474 ext.		
Study Area Code of Reporting Carrier:	278011	Filing Due Date for this form:	07/03/2017
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.			

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING CERTIFICATION DATA ON THE CARRIER'S BEHALF:

I certify that (Name of Agent)	is authorized to submit the information reported on behalf of the reporting porting carrier; my responsibilities include ensuring compliance with 47 CFR §54,1009(a)(4) reported to the ts and data provided to the authorized agent is accurate.
Name of Authorized Agent:	
Name of Reporting Carrier:	
Signature of Authorized Officer or Employee:	Date:
Printed name of Authorized Officer or Employee:	
Title or position of Authorized Officer or Employee:	
Telephone number of Authorized Officer or Employee:	
Study Area Code of Reporting Carrier:	Filing Due Date for this form:
	ounished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

TO BE COMPLETED BY THE AUTHORIZED AGENT:

Certification of Agent Author	ized to File Compliance with 47 CFR §54.1009(a)(4) on Behalf of Reporting Carrier
l, as agent for the reporting carrier, certify that I am authodata provided by the reporting carrier; and, to the best of	•	ng carrier; I have provided the data reported herein based or ate.
Name of Reporting Carrier:		
Name of Authorized Agent Firm:		
Signature of Authorized Agent or Employee of Agent:		Date:
Name of Authorized Agent Employee:		
Fitle or position of Authorized Agent or Employee of Agent		
Felephone number of Authorized Agent or Employee of Ag	ent:	
	Filing Due Date for this form:	

		146(167) 110(167) 1685(168) 1686(168) 1686(168) 1686(168) 1686(168) 1686(168) 1686(168) 1686		
(080) Tribel	Lands Reporting			FCC Form 690
				Approved by OMB OMB Control No. 3060-1185
				Page 5 of 8
	and the state of the	tustikitii siileitiikki kkiittiittiin kitti	HISTORIA SAARIHISTOOTAA KANTOOTAA HAADAA HAADAA KANTOOTAA KANTOOTAA KANTOOTAA KANTOOTAA KANTOOTAA KANTOOTAA KA TAROOTAA KANTOOTAA K	
<010>	Study Area Code		278011	
<015>	Study Area Name		Central Louisiana Cellular, LL	с
<020>	Program Year		2017	
<030>	Contact Name - Person USAC should contact regarding t	his data	Chad Strausbaugh	
<035>	Contact Telephone Number - Number of person identific	ed in data line <030	U> 6105356474 ext.	
<039>	Contact Email Address - Email Address of person identif	ieu in data inie 203	U> cstrausbaugh@cellonenation.com	
<142>	State			
11727				
<143>	County			
	· -			
<144>	Tribal Land(s) on which ETC Serves			
<145>	Tribal Government Engagement Obligation			
	-	Name of Attached D	ocument (.pdf)	
	If your company serves Tribal lands, please select (Yes,	No, Not Applicable) for	
	each of these boxes to confirm the status described on			
	PDF, on line 145, demonstrates coordination with the	Tribal		
	government pursuant to § 54.1004 includes:			
		ſ		
			Select	
na a.c.			(Yes, No, Not Applicable)	
<146>	Needs assessment and deployment planning with a for community anchor institutions;	cus on Tribal		
<147>	Feasibility and sustainability planning;			
<148>	Marketing services in a culturally sensitive manner;	ļ		
<149>	Compliance with Rights of way processes	l		
	Compliance with Land Use permitting requirements	ŀ		
<150>	·			
<151>	Compliance with Facilities Siting rules Compliance with Environmental Review processes			
<152>	computance with Environmental Review Drocesses			

Compliance with Cultural Preservation review processes

<154> Compliance with Tribal Business and Licensing requirements.

<153>

(090) Project	: Update Information	FCC Form 690 Approved by OMB OMB Control No. 3060-1185 Page 6 of 8
<010>	Study Area Code	278011
<015>	Study Area Name	Central Louisiana Cellular, LLC
<020>	Program Year	2017
<030>	Contact Name - Person USAC should contact regarding this data	Chad Strausbaugh
<035>	Contact Telephone Number - Number of person identified in data line <030>	6105356474 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	cstrausbaugh@cellonenation.com
<200> <201> <202> <203>	Date Authorized to Receive Support Targeted Completion Date Total Mobility Fund Support Awarded Total Mobility Fund Support Disbursed	08/08/2013 08/09/2015 74580.00
<210>	Actual Completion Date	07/08/2015
<211>	Project Status Description (attached)	278011_PSD_LA.pdf
<212><213><214><215><216><217>	Please check these boxes below to confirm that the attached PDF, on line 211, contains a project status pursuant to §54.1005(b)(2)(v). The information shall be submitted as appropriate. Status of Network Deployment - Network Design Status of Network Deployment - Construction Status of Network Deployment - Deployment Status of Network Deployment - Maintenance Project Budget Status Project Plan Status	{Name of PDF attached}

⊙ 3G **○** 4G

<218> Network will Support 3G/4G Mobile Service?

	M8 lo. 3060-1185
Page 7 of 8	

<010>	Study Area Code	278011
<015>	Study Area Name	Central Louisiana Cellular, LLC
<020>	Program Year	2017
<030>	Contact Name - Person USAC should contact regarding this data	Chad Strausbaugh
<035>	Contact Telephone Number - Number of person identified in data line <030>	6105356474 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	cstrausbaugh@cellonenation.com

TO BE COMPLETED BY THE REPORTING CARRIER, IF THE REPORTING CARRIER IS FILING ON ITS OWN BEHALF:

I certify that I am an officer of the reporting carrier; my responsibilities include ensuring the accuracy of the reporting requirements for Mobility Fund recipients; and, to the best of my knowledge, the information reported on this form and in any attachments is accurate.		
Name of Reporting Carrier: Central Louisiana Cellular, LLC		
Signature of Authorized Officer: CERTIFIED ONLINE	Date 06/28/2017	
Printed name of Authorized Officer: Chad Strausbaugh		
Fitle or position of Authorized Officer: Staff Counsel		
Felephone number of Authorized Officer: 6105356474 ext.		
Study Area Code of Reporting Carrier: 278011	Filing Due Date for this form: 07/03/2017	

Page 8 of 8

<010>	Study Area Code	278011
<015>	Study Area Name	Central Louisiana Cellular, LLC
<020>	Program Year	2017
<030>	Contact Name - Person USAC should contact regarding this data	Chad Strausbaugh
<035>	Contact Telephone Number - Number of person identified in data line <030>	6105356474 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	cstrausbaugh@cellonenation.com

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING ON THE CARRIER'S BEHALF:

· · · · · · · · · · · · · · · · · · ·	
Certification of Officer to Authorize an Ag	gent to File for Mobility Fund Recipients on Behalf of Reporting Carrier
I certify that (Name of Agent)	is authorized to submit the information reported on behalf of the reporting carrier. I
also certify that I am an officer of the reporting carrier; my responding to the best of my knowledge, the reports and data process.	onsibilities include ensuring the accuracy of the data reporting requirements provided to the authorized
Name of Authorized Agent:	
Name of Reporting Carrier:	
Signature of Authorized Officer:	Date:
Printed name of Authorized Officer:	
Title or position of Authorized Officer:	
Telephone number of Authorized Officer:	
Study Area Code of Reporting Carrier:	Filing Due Date for this form:
	nished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment der Title 18 of the United States Code, 18 U.S.C. § 1001.

TO BE COMPLETED BY THE AUTHORIZED AGENT:

Certification of Agent Auti	horized to File for Mobility Fund Recipients on Behalf of R	eporting Carrier
, as agent for the reporting carrier, certify that I am au reported herein based on data provided by the reporti	nthorized to submit the reports for Mobility Fund recipients on behing carrier; and, to the best of my knowledge, the information repo	alf of the reporting carrier; I have provided the data rted herein is accurate.
Name of Reporting Carrier:		
Name of Authorized Agent Firm:		
Signature of Authorized Agent or Employee of Agent:		Date:
Name of Authorized Agent Employee:		
Title or position of Authorized Agent or Employee of Ag	ent	
	Agent:	
Telephone number of Authorized Agent or Employee of		

Attachments

FCC Form 690 Approved by OMB OMB Control No. 3060-1185

<010>	Study Area Code	278011
<015>	Study Area Name	Central Louisiana Cellular, LLC
<020>	Program Year	2017
<030>	Contact Name - Person USAC should contact regarding this data	Chad Strausbaugh
<035>	Contact Telephone Number - Number of person identified in data line <030>	6105356474 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	cstrausbaugh@cellonenation.com
<140>	Coverage and Performance Report Year	08/2016 - 07/2017

<141>

<a1></a1>	A-25	<#3>	<b1></b1>	 sb2×	<63>	<01>	<02>	දසා	<d>>d></d>
State	County Rapides	Census Block	Resident Population per Census Block	Resident Population Newly Reached by Service	Total Resident Population Reached by Service	Road Miles per Census Block	Road Miles per Census Block Newly Reached	Total Road Miles covered per Census Block	Certify that Coverage and Performacne data is uploaded (yes/no)
LA	Rapides	0000	0	0	0	0.0	0.0	0.0	Yes

								15 1 5 100 200	
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									<u></u>

Percentage of		
Total Population		
Reached by		
Service		

0		
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Percentage of Total Road Miles covered by Service

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Central Louisiana Cellular, LLC Form 690 – Annual Report for August 2016 – July 2017

FCC Form 690 - Coverage and Performance Data Update

Central Louisiana Cellular, LLC has completed the coverage/performance testing for this SAC, which is reported in its Payment Request 3 submitted for this SAC.

Central Louisiana Cellular, LLC Form 690 – Annual Report for August 2016 – July 2017

Project Status Description

Item: SAC 278011

County/State: Rapides, LA

Total Award Amount: \$74,580.00

Project Description

To date, Central Louisiana Cellular, LLC has completed construction, and deployed its network in at least 75% of the eligible road miles associated with this SAC. There are no further material updates with respect to network design, construction, deployment and maintenance associated with this SAC.

	Fund - 854.1009 Annual Reporting lection Form		Avg. Bur	FCC Form Approved by OMB OMB 3060-1185 den Estimate per Respondent: 18 Hours
<010>	Study Area Code	278012	. .	
<015>	Study Area Name	Central Louisiana Cellular, LLC		
<020>	Program Year	2017		Aggepted / Filed
<030>	Contact Name: Person USAC should contact with questions about this data	Chad Strausbaugh		JUN 29 2017
<035>	Contact Telephone Number: Number of the person identified in data line <030>	6105356474 ext.		Federal Communications Commission Office of the Secretary
<039>	Contact Email: Email of the person identified in data line <030>	cstrausbaugh@cellonenation.com		
<040>	Has the information required pursuant to §54.1009 <041> Attach a description of the documents file			•
			<041>	
	<042> Cite the Study Area Code (SAC) for the Fo	rm 481 reporting	<042>	
<080>	Tribal Lands Reporting (y/n?) (Does this study area cover	r tribal lands? Yes or No)	0	•

Notice to Individuals Required by the Paperwork Reduction Act of 1995

OMB Control Number 3060-1185 (Annual Report for Mobility Fund Phase I Support, FCC Form 690 and Record Retention Requirements) Notice to Individuals Required by the Paperwork Reduction Act of 1995

Public reporting burden for this collection of information is estimated to average 18 hours per response. Our estimate includes the time to read the instructions, look through existing records, gather and maintain required data, and actually complete and review the form or response. If you have any comments on this estimate, or on how we can improve the collection and reduce the burden it causes you, please write the Federal Communications Commission, Office of Managing Director, AMD-PERM, Washington, DC 20554, Paperwork Reduction Act Project (3060-1185). Please DO NOT SEND COMPLETED FORMS TO THIS ADDRESS. You are not required to respond to a collection of information sponsored by the Federal government, and the government may not conduct or sponsor this collection, unless it displays a currently valid OMB control number and/or we fail to provide you with this notice. This collection has been assigned an OMB control number of 3060-1185.

THIS NOTICE IS REQUIRED BY THE PAPERWORK REDUCTION ACT OF 1995, PUBLIC LAW 104-13, OCTOBER 1, 1995, 44 U.S.C. SECTION 3507.

160000000000000000000000000000000000000		
(050) Cari	ler Contact Form	FCC Form 690
		Approved by OMB
		OMB Control No. 3060-1185
<u> </u>	2	Page 2 of 8
<010>	Study Area Code	278012
<015>	Study Area Name	Central Louisiana Cellular, LLC
<020>	Program Year	2017
<030> <035>	Contact Name - Person USAC should contact regarding	1-4:- 4-4: 1:
<039>	Contact Telephone Number - Number of person identif Contact Email Address - Email Address of person identif	find in data line 1930.
	- Service of person recent	cstrausbaugh@cellonenation.com
Reporting	Carrier / Mobility Fund Phase 1 Winning Bidder	
<110>	FCC Registration Number	20165593
<111>	Filing Carrier Name	Central Louisiana Cellular, LLC
<112>	Winning Bidder Carrier Name	Central Louisiana Cellular, LLC
<113>	Street Address (or PO Box)	1170 Devon Park Drive, Suite 104
<114>	City	Wayne
<115>	State	PA
<116>	Zip-Code	19087
<117>	Telephone Number	
<118>	Fax Number	6105356474 ext.
<119>	Email Address	6106885209
		cstrausbaugh@cellonenation.com
Contact In		
41205	if same as above, indicate in this box	
<120>	Name (First, MI, Last, Suffix)	Chad Strausbaugh
<121>	Filing Carrier Name	Central Louisiana Cellular, LLC
<122>	Street Address (or PO Box)	1170 Devon Park Drive Suite 104
<123>	City	Wayne
<124>	State	PA
<125>	Zip-Code	19087
<126>	Telephone Number	6105356474 ext.
<127>	Fax Number	6106885209
<128>	Email Address	cstrausbaugh@cellonenation.com
Autnorized	Agent Information	
41305	if no agent, indicate in this box	
<130>	Name (First, MI, Last, Suffix)	
<131>	Company	
<132>	Street Address (or PO Box)	
<133>	City _	
<134>	State _	
<135>	Zip-Code	
<136>	Telephone Number	
<137>	Fax Number	
<138>	Email Address	
	_	

(060) Cov	erage and Performance Report	FCC Form 690 Ap proved by OMB OMB Control No. 3060-1185 Page 3 of 8
<010>	Study Area Code	278012
<015>	Study Area Name	Central Louisiana Cellular, LLC
<020>	Program Year	2017
<030>	Contact Name - Person USAC should contact regarding this data	Chad Strausbaugh
<035>	Contact Telephone Number - Number of person identified in data line <030>	6105356474 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	cstrausbaugh@cellonenation.com
<140>	Coverage and Performance Report Year 08/2016 - 07/2017	
	278012_CPRd	LA.zip

Coverage and Performace attachments

<141> Total Road Road Certify that Road Miles per Miles Coverage and Resident Total Resident Miles Census Performance data covered Resident Population Population per Block is uploaded per Population per Newly Reached Reached by Census Newly Census (Yes/no) State County Census Block Census Block by Service Service Block Reached Block -- \$ee attached worksheet Percentage of Total Percentage of Total Population Reached by Road Miles covered

by Service

Service

(070) Urban Rate Comparability Certifica	ätlon Compliance	FCC Form 590 Approved by OMB OMB Control No. 3060-1185 Page 4 of 8
c010s Church Aven Code	278012	

<010>	Study Area Code	278012
<015>	Study Area Name	Central Louisiana Cellular, LLC
<020>	Program Year	2017
<030>	Contact Name - Person USAC should contact regarding this data	Chad Strausbaugh
<035>	Contact Telephone Number - Number of person identified in data line <030>	6105356474 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	cstrausbaugh@cellonenation.com

TO BE COMPLETED BY THE REPORTING CARRIER, IF THE REPORTING CARRIER IS FILING CERTIFICATION DATA ON ITS OWN BEHALF:

Certification of Officer or Employee as to Compliance with 47 CFR §54.1009(a)(4) l certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring compliance with 47 CFR §54.1009(a)(4), the information reported on this form and in any attachments is accurate. Central Louisiana Cellular, LLC Name of Reporting Carrier: CERTIFIED ONLINE Signature of Authorized Officer: Date 06/28/2017 Chad Strausbaugh Printed name of Authorized Officer: Staff Counsel Title or position of Authorized Officer: 6105356474 ext. Telephone number of Authorized Officer: 278012 Filing Due Date for this form: 07/03/2017 Study Area Code of Reporting Carrier: Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING CERTIFICATION DATA ON THE CARRIER'S BEHALF:

I certify that (Name of Agent) carrier. I also certify that I am an officer or employee of the repor authorized agent; and, to the best of my knowledge, the reports a	is authorized to submit the information reported on behalf of the reporting rting carrier; my responsibilities include ensuring compliance with 47 CFR §54.1009(a)(4) reported to the and data provided to the authorized agent is accurate.
Name of Authorized Agent:	
Name of Reporting Carrier:	
Signature of Authorized Officer or Employee:	Date:
Printed name of Authorized Officer or Employee:	
Title or position of Authorized Officer or Employee:	
Telephone number of Authorized Officer or Employee:	
Study Area Code of Reporting Carrier:	Filing Due Date for this form:
Persons willfully making false statements on this form can be puni	Filing Due Date for this form: shed by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment er Title 18 of the United States Code, 18 U.S.C. § 1001.

TO BE COMPLETED BY THE AUTHORIZED AGENT:

Certification of Agent Authoriz	ed to File Compliance with 47 CFR §54.1009(a)(4) on Behalf of Reporting Carrier
, as agent for the reporting carrier, certify that I am author	zed to submit the certification on behalf of the reporting carrier; I have provided the data reported herein based or
data provided by the reporting carrier; and, to the best of n	y knowledge, the information reported herein is accurate.
Name of Reporting Carrier:	
Name of Authorized Agent Firm:	
signature of Authorized Agent or Employee of Agent:	Date:
lame of Authorized Agent Employee:	
itle or position of Authorized Agent or Employee of Agent	
elephone number of Authorized Agent or Employee of Ager	t:
tudy Area Code of Reporting Carrier:	Filing Due Date for this form:

(080) Trit	aal Lands Reporting			
				FCC Form 690 Approved by OMB
				OMB Control No. 3050-1185
Maria Ma				Page 5 of 8
<010> <015>	Study Area Code		278012	
<020>	Study Area Name Program Year		Central Louisians	a Cellular, LLC
<030>	Contact Name - Person USAC should contact regarding	this data	2017 Chad Strausbaugh	
<035>	Contact Telephone Number - Number of person identif	ied in data line	<030> 6105356474 ext	
<039>	Contact Email Address - Email Address of person identif	ied in data line	<030> cstrausbaugh@cell	onenation.com
<142>	State			
	State			
<143>	County			
<144>	Tribal Land(s) on which ETC Serves			
	•			
				
<145>	Tribal Government Engagement Obligation			
		Name of Attached	d Document (.pdf)	
	If your company serves Tribal lands, please select (Yes, N	lo Not Applicat	ole) for	
	each of these boxes to confirm the status described on t	he attached	nc) 101	
	PDF, on line 145, demonstrates coordination with the To	ribal		
	government pursuant to § 54.1004 includes:			
				1
			Select	
<146>	Needs assessment and deployment planning with a focu	ıs on Tribal	(Yes, No, Not Applicable)	
	community anchor institutions;			
<147>	Feasibility and sustainability planning;			
<148>	Marketing services in a culturally sensitive manner;			
<149>	Compliance with Rights of way processes			
<150>	Compliance with Land Use permitting requirements			
<151>	Compliance with Facilities Siting rules			
<152>				
	Compliance with Environmental Review processes			
<153>	Compliance with Cultural Preservation review processes			
<154>	Compliance with Tribal Business and Licensing requireme	nts.		

(090) Projec	t Update Information	FCC Form 690
		Approved by OMB
		OMB Control No. 3060-1185 Page 6 of 8
<010>	Study Area Code	278012
<015>	Study Area Name	Central Louisiana Cellular, LLC
<020>	Program Year	2017
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<035>	Contact Telephone Number - Number of person identified in data line <030>	6105356474 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	cstrausbaugh@cellonenation.com
<200>	Date Authorized to Receive Support	08/08/2013
<201>	Targeted Completion Date	08/09/2015
<202>	Total Mobility Fund Support Awarded	27852.00
<203>	Total Mobility Fund Support Disbursed	26882.75
-210s	Ashard Constitution on a	
<210>	Actual Completion Date	07/02/2015
<211>	Project Status Description (attached)	278012_PSD_LA.pdf
	Places shock these haves helevite southwest to the same to the	{Name of PDF attached}
	Please check these boxes below to confirm that the attached PDF, on line	
	211, contains a project status pursuant to §54.1005(b)(2)(v). The information shall be submitted as appropriate.	
<212>	Status of Network Deployment - Network Design	
<213>	Status of Network Deployment - Construction	<u></u>
<214>	Status of Network Deployment - Deployment	
<215>	Status of Network Deployment - Deployment Status of Network Deployment - Maintenance	<u> </u>
<216>	Project Budget Status	/
<217>	Project Plan Status	- ' -

⊙ 3G **○** 4G

<218> Network will Support 3G/4G Mobile Service ?

<010>	Study Area Code	278012
<015>	Study Area Name	Central Louisiana Cellular, LLC
<020>	Program Year	2017
<030>	Contact Name - Person USAC should contact regarding this data	Chad Strausbaugh
<035>	Contact Telephone Number - Number of person identified in data line <030>	6105356474 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	cstrausbaugh@cellonenation.com

TO BE COMPLETED BY THE REPORTING CARRIER, IF THE REPORTING CARRIER IS FILING ON ITS OWN BEHALF:

Certification of Officer as to the Accuracy of the Data Reported for Mobility Fund Recipients

I certify that I am an officer of the reporting carrier; my responsibilities include ensuring the accuracy of the reporting requirements for Mobility Fund recipients; and, to the best of my knowledge, the information reported on this form and in any attachments is accurate.

Name of Reporting Carrier:

Central Louisiana Cellular, LLC

Signature of Authorized Officer:

Certified Online

Certified Online

Chad Strausbaugh

Title or position of Authorized Officer:

Staff Counsel

Telephone number of Authorized Officer:

6105356474 ext.

Study Area Code of Reporting Carrier:

278012

Filing Due Date for this form:

07/03/2017

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

Page 8 of 8

<010>	Study Area Code	278012
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Certification of Officer to Authorize an Agent	t to File for Mobility Fund Recipients on Behalf of Reporting Carrier
	is authorized to submit the information reported on behalf of the reporting carrier. I ibilities include ensuring the accuracy of the data reporting requirements provided to the authorized ided to the authorized agent is accurate.
Name of Authorized Agent:	
Name of Reporting Carrier:	
Signature of Authorized Officer:	Date:
Printed name of Authorized Officer:	
Title or position of Authorized Officer:	
Telephone number of Authorized Officer:	
Study Area Code of Reporting Carrier:	Filing Due Date for this form:
Persons willfully making false statements on this form can be punished under Ti	ed by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment fitle 18 of the United States Code, 18 U.S.C. § 1001.

TO BE COMPLETED BY THE AUTHORIZED AGENT:

Certification of Ager	nt Authorized to File for Mobility Fund Recipients on Behalf of Reporting Carrier	r
, as agent for the reporting carrier, certify that I reported herein based on data provided by the	I am authorized to submit the reports for Mobility Fund recipients on behalf of the reporting reporting carrier; and, to the best of my knowledge, the information reported herein is accurately	; carrier; I have provided the data rate.
Name of Reporting Carrier:		
Name of Authorized Agent Firm:		
Signature of Authorized Agent or Employee of Ag	gent:	Date:
Name of Authorized Agent Employee:		
Title or position of Authorized Agent or Employee	e of Agent	
Telephone number of Authorized Agent or Emplo	oyee of Agent:	
Study Area Code of Reporting Carrier:	Filing Due Date for this form:	
Persons willfully making false statements on	n this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 18 of the United States Code, 18 U.S.C. § 1001.	ર, 503(b), or fine or imprisonment under Title

Attachments

FCC Form 590 Approved by OMB OMB Control No. 3060-1185

<010>	Study Area Code	278012
<015>	Study Area Name	Central Louisiana Cellular, LLC
<020>	Program Year	2017
<030>	Contact Name - Person USAC should contact regarding this data	Chad Strausbaugh
<035>	Contact Telephone Number - Number of person identified in data line <030>	6105356474 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	cstrausbaugh@cellonenation.com
<140>	Coverage and Performance Person Vess	08/2016 - 07/2017
		07,2017

<141>

201	<a2></a2>	483 >		<62>					
ani tira ka Albih			(((((),((),((),((),((),((),((),((),((),	S949///////////////////////////////////	<bs></bs> 508>	cct>	<c2></c2>	- <u>(ca)</u>	<u> </u>
State	County Rapides	Census Block	Resident Population per Census Block	Resident Population Newly Reached by Service	Total Resident Population Reached by Service	Road Miles per Census Block	Road Miles per Census Block Newly Reached	Total Road Miles covered per Census Block	Certify that Coverage and Performacne data is uploaded (yes/no)
LA	Rapides	0000	0	0	0	0.0	0.0	0.0	Yes
									
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	, and the second								
			-						
				<u></u>					
	-								

Percentage of
Total Population
Reached by
Sonico

0		
		1

Percentage of Total Road Miles covered by Service

0			

Central Louisiana Cellular, LLC Form 690 – Annual Report for August 2016 – July 2017

FCC Form 690 - Coverage and Performance Data Update

Central Louisiana Cellular, LLC has completed the coverage/performance testing for this SAC, which is reported in its Payment Request 3 submitted for this SAC.

Central Louisiana Cellular, LLC Form 690 – Annual Report for August 2016 – July 2017

Project Status Description

Item: SAC 278012

County/State: Rapides, LA

Total Award Amount: \$27,852.00

Project Description

To date, Central Louisiana Cellular, LLC has completed construction, and deployed its network in at least 75% of the eligible road miles associated with this SAC. There are no further material updates with respect to network design, construction, deployment and maintenance associated with this SAC.

200111111111111111111111111111111111111	Fund - 554.1009 Annual Reporting lection Form		Avg. Burd	FCC Form Approved by OMB OMB 3060-1185 Ien Estimate per Respondent: 18 Hours
<010>	Study Area Code	278013		
<015>	Study Area Name	Central Louisiana Cellular, LLC		coented / Elled
<020>	Program Year	2017		locepted / Filed
<030>	Contact Name: Person USAC should contact with questions about this data	Chad Strausbaugh		JUN 29 2017
<035>	Contact Telephone Number: Number of the person identified in data line <030>	6105356474 ext.	Fede	ral Communications Commission Office of the Secretary
<039>	Contact Email: Email of the person identified in data line <030>	cstrausbaugh@cellonenation.com		
41.0555 No. 15.05		and the state of t		THAN TO SUITE THE THE SECOND S
<040>	Has the information required pursuant to §54.1009		<u>N)</u> <040>	•
	<041> Attach a description of the documents file	d with the Form 481 reporting	<041>	
	<042> Cite the Study Area Code (SAC) for the For	m 481 reporting	<042>	
<080>	Tribal Lands Penerting (v/s2)			
~UOU>	Tribal Lands Reporting (y/n?) (Does this study area cover	tribal lands? Yes or No)	0	$oldsymbol{\odot}$

Notice to Individuals Required by the Paperwork Reduction Act of 1995

OMB Control Number 3060-1185 (Annual Report for Mobility Fund Phase I Support, FCC Form 690 and Record Retention Requirements) Notice to Individuals Required by the Paperwork Reduction Act of 1995

Public reporting burden for this collection of information is estimated to average 18 hours per response. Our estimate includes the time to read the instructions, look through existing records, gather and maintain required data, and actually complete and review the form or response. If you have any comments on this estimate, or on how we can improve the collection and reduce the burden it causes you, please write the Federal Communications Commission, Office of Managing Director, AMD-PERM, Washington, DC 20554, Paperwork Reduction Act Project (3060-1185). Please DO NOT SEND COMPLETED FORMS TO THIS ADDRESS. You are not required to respond to a collection of information sponsored by the Federal government, and the government may not conduct or sponsor this collection, unless it displays a currently valid OMB control number and/or we fail to provide you with this notice. This collection has been assigned an OMB control number of 3060-1185.

THIS NOTICE IS REQUIRED BY THE PAPERWORK REDUCTION ACT OF 1995, PUBLIC LAW 104-13, OCTOBER 1, 1995, 44 U.S.C. SECTION 3507.

(050) Car	rier Contact Form		FCC Form 690 Approved by OMB OMB Control No. 3060-1185 Page 2 of 8
41148601411886411165			<u> </u>
<010> <015>	Study Area Name	278013	
<020>	Study Area Name Program Year	Central Louisiana Cellular, LLC	
<030>	Contact Name - Person USAC should contact regarding the	2017 is data Chad Strausbaugh	
<035>	Contact Telephone Number - Number of person identifie		
<039>	Contact Email Address - Email Address of person identifie	ed in data line <030> cstrausbaugh@cellonenation.com	
Reporting	Carrier / Mobility Fund Phase 1 Winning Bidder		
<110>	FOC D. 11. 11. 11. 1	20165593	
<111>	Filtra Court N	Central Louisiana Cellular, LLC	
<112>	Winning Bidder Carrier Name	Central Louisiana Cellular, LLC	
<113>	Charact Address (BOD)	1170 Devon Park Drive, Suite 104	
<114>	· _	Wayne	
<115>	State	PA	****
<116>	Zip-Code	19087	
<117>	Telephone Number	6105356474 ext.	
<118>	Fax Number	6106885209	
<119>	Email Address	cstrausbaugh@cellonenation.com	
<120>		had Strausbaugh	
<121>		entral Louisiana Cellular, LLC	
<122>		170 Devon Park Drive Suite 104	
<123>	City	ayne	
<124>	State	A	
<125>	Zip-Code	9087	
<126>	Telephone Number	105356474 ext.	
<127>	Fax Number	106885209	
<128>	Email Address	strausbaugh@cellonenation.com	****
<u>Authorize</u>	d Agent Information if no agent, indicate in this box		
<130>	Name (First, MI, Last, Suffix)		
<131>	_		
<132>	Company		
	Street Address (or PO Box)		
<133>	City	-	
<134>	State		
<135>	Zip-Code		
<136>	Telephone Number		
<137>	Fax Number		
<138>	Email Address		
	_		

(060) Cov	erage and Performance Report	FCC Form 690 Ap proved by OMB OMB Control No. 3060-1185 Page 3 of 8
<010>	Study Area Code	278013
<015>	Study Area Name	Central Louisiana Cellular, LLC
<020>	Program Year	2017
<030>	Contact Name - Person USAC should contact regarding this data	Chad Strausbaugh
<035>	Contact Telephone Number - Number of person identified in data line <030>	6105356474 ext.

<140>	Coverage and Performance Report Year	08/2016 - 07/2017
		278013_CPRd_LA.zip
	Coverage and Performace atta	ichments

Contact Email Address - Email Address of person identified in data line <030> cstrausbaugh@cellonenation.com

<039>

<a1></a1>	<a2></a2>	<a3></a3>	<b1>></b1>	<b2></b2>	<b3></b3>	<c1></c1>	· <c2></c2>	< c3>	<d>></d>
								•	
							ł		
							Road	Total Road	Certify that
						Road	Miles per	Miles	Coverage and
				Resident	Total Resident	Miles	Census	covered	Performance o
			Resident	Population	Population	per	Block	per	is uploaded
State	County	Consus Blook	Population per Census Block	Newly Reached by Service	Reached by Service	Census Block	Newly Reached	Census Block	(Yes/no)
State	County	Census block	Census Block	by Service	Service	ВІОСК	Reached	BIOCK	
		<u> </u>							<u> </u>
			(ee attach	ed worksl	heet			
						-	ļ		
	 						 		
	<u> </u>		<u> </u>	<u> </u>		<u> </u>		<u> </u>	<u> </u>
						,			
			0			ļ	0		
	Percenta	ge of Total			Percentage of	of Total			
		Reached by		I	Road Miles o				

by Service

Service

(070) Urban Rate Comparability Certification Compliance	
HU/DI Urban Kate Comparability Certification Compliance	FCC Form 690
	10010
	Approved by OMB
	Approvious of comme
	OMB Control No. 3060-1185
	Civili Control No. 2000 2203
	Page 4 of 8
	1000 7 010

<010>	Study Area Code	278013
<015>	Study Area Name	Central Louisiana Cellular, LLC
<020>	Program Year	2017
<030>	Contact Name - Person USAC should contact regarding this data	Chad Strausbaugh
<035>	Contact Telephone Number - Number of person identified in data line <030>	6105356474 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	cstrausbaugh@cellonenation.com

TO BE COMPLETED BY THE REPORTING CARRIER, IF THE REPORTING CARRIER IS FILING CERTIFICATION DATA ON ITS OWN BEHALF:

Certification of Officer or Employee as to Compliance with 47 CFR §54.1009(a)(4) certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring compliance with 47 CFR §54.1009(a)(4), the information reported on this form and in any attachments is accurate. Central Louisiana Cellular, LLC Name of Reporting Carrier: CERTIFIED ONLINE Signature of Authorized Officer: Date 06/28/2017 Chad Strausbaugh Printed name of Authorized Officer: Staff Counsel Title or position of Authorized Officer: 6105356474 ext. Telephone number of Authorized Officer: 278013 Filing Due Date for this form: 07/03/2017 Study Area Code of Reporting Carrier: Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING CERTIFICATION DATA ON THE CARRIER'S BEHALF:

l certify that (Name of Agent)	is authorized to submit the information reported on behalf of the reporting
carrier. I also certify that I am an officer or employee of the repo	orting carrier; my responsibilities include ensuring compliance with 47 CFR §54.1009(a)(4) reported to the
authorized agent; and, to the best of my knowledge, the reports	and data provided to the authorized agent is accurate.
Name of Authorized Agent:	
Name of Reporting Carrier:	
Signature of Authorized Officer or Employee:	Date:
Printed name of Authorized Officer or Employee:	
Title or position of Authorized Officer or Employee:	
Telephone number of Authorized Officer or Employee:	
Study Area Code of Reporting Carrier:	Filing Due Date for this form:
	nished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment der Title 18 of the United States Code, 18 U.S.C. § 1001.

TO BE COMPLETED BY THE AUTHORIZED AGENT:

Certification of Agent Authorized to File Compliance with 47 CFR §54.1009(a)(4) on Behalf of Reporting Carrier		
	rized to submit the certification on behalf of the reporting carrier; I have provided the data reported herein based on my knowledge, the information reported herein is accurate.	
Name of Reporting Carrier:		
Name of Authorized Agent Firm:		
Signature of Authorized Agent or Employee of Agent:	Date:	
Name of Authorized Agent Employee:		
Fitle or position of Authorized Agent or Employee of Agent		
Telephone number of Authorized Agent or Employee of Age	nt:	
Study Area Code of Reporting Carrier:	Filing Due Date for this form:	

(080) Triba	Lands Reporting			FCC Form 690 Approved by OMB
				OM8 Control No. 3050-1185
				Page 5 of 8
<010>	Study Area Code		278013	
<015>	Study Area Name		Central Louisiana Cellular, LLC	
<020>	Program Year		2017	
<030>	Contact Name - Person USAC should contact regarding t	his data	Chad Strausbaugh	
<035>	Contact Telephone Number - Number of person identifie	ed in data line <0		
<039>	Contact Email Address - Email Address of person identifi	ed in data line <0	30> cstrausbaugh@cellonenation.com	
<142>	State			
<143>	County			
<144>	Tribal Land(s) on which ETC Serves			
<145>	Tribal Government Engagement Obligation			
\143Z	mbai Government Engagement Obligation	Name of Attached	Document (.pdf)	
		oj rikuureu		
	If your company serves Tribal lands, please select (Yes,		e) for	
	each of these boxes to confirm the status described on			
	PDF, on line 145, demonstrates coordination with the 1	ribal		
	government pursuant to § 54.1004 includes:			
			Select	
			(Yes, No, Not Applicable)	
<146>	Needs assessment and deployment planning with a foo	cus on Tribal		
	community anchor institutions;			
<147>	Feasibility and sustainability planning;			

Marketing services in a culturally sensitive manner;

Compliance with Land Use permitting requirements

Compliance with Environmental Review processes

Compliance with Cultural Preservation review processes

Compliance with Tribal Business and Licensing requirements.

Compliance with Rights of way processes

Compliance with Facilities Siting rules

<148>

<149>

<150>

<151>

<152>

<153>

<154>

(090) Project	Update information	FCC Form 690
		Approved by OMB
		OMB Control No. 3060-1185 Page 6 of 8
<010>	Study Area Code	278013
<015>	Study Area Name	Central Louisiana Cellular, LLC
<020>	Program Year	2017
<030>	Contact Name - Person USAC should contact regarding this data	Chad Strausbaugh
<035>	Contact Telephone Number - Number of person identified in data line <030>	
<039>	Contact Email Address - Email Address of person identified in data line <030>	cstrausbaugh@cellonenation.com
<200>	Date Authorized to Receive Support	08/08/2013
<201>	Targeted Completion Date	08/09/2015
<202>	Total Mobility Fund Support Awarded	29664.00
<203>	Total Mobility Fund Support Disbursed	23593.27
<210>	Actual Completion Date	06/10/2015
<211>	Project Status Description (attached)	278013_PSD_LA.pdf
		{Name of PDF attached}
	Please check these boxes below to confirm that the attached PDF, on line	
	211, contains a project status pursuant to §54.1005(b)(2)(v). The information	
	shall be submitted as appropriate.	
<212>	Status of Network Deployment - Network Design	✓
<213>	Status of Network Deployment - Construction	
<214>	Status of Network Deployment - Deployment	✓
<215>	Status of Network Deployment - Maintenance	✓
<216>	Project Budget Status	✓
<217>	Project Plan Status	

<218> Network will Support 3G/4G Mobile Service ?

<010>	Study Area Code	278013
<015>	Study Area Name	Central Louisiana Cellular, LLC
<020>	Program Year	2017
<030>	Contact Name - Person USAC should contact regarding this data	Chad Strausbaugh
<035>	Contact Telephone Number - Number of person identified in data line <030>	6105356474 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	cstrausbaugh@cellonenation.com

TO BE COMPLETED BY THE REPORTING CARRIER, IF THE REPORTING CARRIER IS FILING ON ITS OWN BEHALF:

l certify that I am an officer of the reporti best of my knowledge, the information re		include ensuring the accuracy of the reporting requirements for Mobility Fund recipients; and, to the attachments is accurate.
Name of Reporting Carrier: Centra	l Louisiana Cellular, LLC	
Signature of Authorized Officer:	CERTIFIED ONLINE	Date 06/28/2017
Printed name of Authorized Officer:	Chad Strausbaugh	
Fitle or position of Authorized Officer:	Staff Counsel	
Telephone number of Authorized Officer:	6105356474 ext.	
Study Area Code of Reporting Carrier:	278013	Filing Due Date for this form: 07/03/2017

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

(102) Certification - Agent / Carrier	FCC Form 690	
	Approved by OMB	
	OMB Control No. 3060	-1185
	Page 8 of 8	
	1.3854.01	

<010>	Study Area Code	278013
<015>	Study Area Name	Central Louisiana Cellular, LLC
<020>	Program Year	2017
<030>	Contact Name - Person USAC should contact regarding this data	Chad Strausbaugh
<035>	Contact Telephone Number - Number of person identified in data line <030>	6105356474 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	cstrausbaugh@cellonenation.com

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING ON THE CARRIER'S BEHALF:

Date:
_

TO BE COMPLETED BY THE AUTHORIZED AGENT:

Certification of Agent Authorize	d to File for Mobility Fund Recipients on Behalf of Re	eporting Carrier
l, as agent for the reporting carrier, certify that I am authorize reported herein based on data provided by the reporting carr	ed to submit the reports for Mobility Fund recipients on beha ier; and, to the best of my knowledge, the information repor	olf of the reporting carrier; I have provided the data ted herein is accurate.
Name of Reporting Carrier:		
Name of Authorized Agent Firm:		
Signature of Authorized Agent or Employee of Agent:		Date:
Name of Authorized Agent Employee:		
Title or position of Authorized Agent or Employee of Agent		
Telephone number of Authorized Agent or Employee of Agent	:	
Study Area Code of Reporting Carrier:	Filing Due Date for this form:	
	be punished by fine or forfeiture under the Communications Act of 1: 18 of the United States Code, 18 U.S.C. § 1001.	934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title

Attachments

<141>

FCC Form 690 Approved by OM8 OMB Control No. 3050-1185

Study Area Code	278013
Study Area Name	Central Louisiana Cellular, LLC
Program Year	2017
Contact Name - Person USAC should contact regarding this data	Chad Strausbaugh
Contact Telephone Number - Number of person identified in data line <030>	6105356474 ext.
Contact Email Address - Email Address of person identified in data line <030>	cstrausbaugh@cellonenation.com
Coverage and Performance Report Year	08/2016 - 07/2017
	Study Area Name Program Year Contact Name - Person USAC should contact regarding this data Contact Telephone Number - Number of person identified in data line <030> Contact Email Address - Email Address of person identified in data line <030>

বাচ বাচ বাচ বাচ বাচ বাচ বাচ বাচ Certify that **Total Road** Coverage and Resident Road Miles **Total Resident** Miles Performacne Population per Census Resident Population **Road Miles** covered per data is uploaded Newly Reached by Service . Block Newly Population per Reached by per Census Census Block (yes/no) County Sabine Census Block State Census Block Service Block Reached 0000 LΑ Yes 0 0 0.0 0.0 0.0

0	Percentage of Total	0
Percentage of	Road Miles covered	
Total Population	by Service	1
Reached by	· ·	
Service		

Central Louisiana Cellular, LLC Form 690 – Annual Report for August 2016 – July 2017

FCC Form 690 - Coverage and Performance Data Update

Central Louisiana Cellular, LLC has completed the coverage/performance testing for this SAC, which is reported in its Payment Request 3 submitted for this SAC.

Central Louisiana Cellular, LLC Form 690 – Annual Report for August 2016 – July 2017

Project Status Description

Item: SAC 278013

County/State: Sabine, LA

Total Award Amount: \$29,664.00

Project Description

To date, Central Louisiana Cellular, LLC has completed construction, and deployed its network in at least 75% of the eligible road miles associated with this SAC. There are no further material updates with respect to network design, construction, deployment and maintenance associated with this SAC.

	Fund - 854.1009 Annual Reporting lection Form		Avg. Bu	FCC Form Approved by OMB OMB 3060-1185 rden Estimate per Respondent: 18 Hours
<010>	Study Area Code	278014		
<015>	Study Area Name	Central Louisiana Cellular, LLC		Accepted / Filed
<020>	Program Year	2017		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
<030>	Contact Name: Person USAC should contact with questions about this data	Chad Strausbaugh		JUN 29 2017
<035>	Contact Telephone Number: Number of the person identified in data line <030>	6105356474 ext.		Federal Communications Commission Office of the Secretary
<039>	Contact Email: Email of the person identified in data line <030>	cstrausbaugh@cellonenation.com		
<039>		cstrausbaugh@cellonenation.com		
<039> <040>			<u>N)</u> <040> C)
	Email of the person identified in data line <030>	been provided with a Form 481 filing (Y)	<u>N)</u> <040> C <041>)
	Email of the person identified in data line <030> Has the information required pursuant to §54.1009	been provided with a Form 481 filing (Y/)

Notice to Individuals Required by the Paperwork Reduction Act of 1995

OMB Control Number 3060-1185 (Annual Report for Mobility Fund Phase I Support, FCC Form 690 and Record Retention Requirements) Notice to Individuals Required by the Paperwork Reduction Act of 1995

Public reporting burden for this collection of information is estimated to average 18 hours per response. Our estimate includes the time to read the instructions, look through existing records, gather and maintain required data, and actually complete and review the form or response. If you have any comments on this estimate, or on how we can improve the collection and reduce the burden it causes you, please write the Federal Communications Commission, Office of Managing Director, AMD-PERM, Washington, DC 20554, Paperwork Reduction Act Project (3060-1185). Please DO NOT SEND COMPLETED FORMS TO THIS ADDRESS. You are not required to respond to a collection of information sponsored by the Federal government, and the government may not conduct or sponsor this collection, unless it displays a currently valid OMB control number and/or we fail to provide you with this notice. This collection has been assigned an OMB control number of 3060-1185.

THIS NOTICE IS REQUIRED BY THE PAPERWORK REDUCTION ACT OF 1995, PUBLIC LAW 104-13, OCTOBER 1, 1995, 44 U.S.C. SECTION 3507.

(050) Cai	rler Contact Form			FCC Form 690 Approved by DMB OMB Control No. 3060-1185
5406041611651112				Page 2 of 8
<010>	Study Area Code		278014	
<015> <020>	Study Area Name	· .	Central Louisiana Cellular, LLC	
<030>	Program Year Contact Name - Person USAC should contact regarding the	nic data	2017	
<035>	Contact Telephone Number - Number of person identifie	ed in data line <030>	Chad Strausbaugh 6105356474 ext.	
<039>	Contact Email Address - Email Address of person identifie		cstrausbaugh@cellonenation.com	
Reporting	Carrier / Mobility Fund Phase 1 Winning Bidder		DEPTH DESCRIPTION OF THE PROPERTY OF THE PROPE	·
<110>	ECC Desistantian Number	20165593		
<111>	Filing Corries Name	Central Louisiana Ce	allular IIC	
<112>	Winning Bidden Couries News			
<113>	- Charact Add	Central Louisiana Ce		
<114>	· .	1170 Devon Park Driv Wayne	/e, suite 104	
<115>	State -			
<116>	Zin Codo	PA	· · · · · · · · · · · · · · · · · · ·	
<117>	Zip-Code Telephone Number	19087		
<118>	Fax Number	6105356474 ext.		
<119>	Email Address	6106885209		
11132		cstrausbaugh@cellone	enation.com	
Contact II	nformation			
	if same as above, indicate in this box			
<120>	Name (First, MI, Last, Suffix)	had Strausbaugh		
<121>	Filing Carrier Name	Central Louisiana Cel	llular, LLC	
<122>	Street Address (or PO Box)	170 Devon Park Drive	Suite 104	
<123>	City	layne		
<124>	State	PA		
<125>	Zip-Code	.9087	· .	
<126>	Telephone Number	105356474 ext.		
<127>	Fax Number			
<128>	Fmail Address	106885209		
	<u>c</u>	strausbaugh@celloner	nation.com	
<u>Authorize</u>	d Agent Information			
	if no agent, indicate in this box			
	Name (First, MI, Last, Suffix)			
<131>	Company			
<132>	Street Address (or PO Box)			
<133>	City			
<134>	State			
<135>	Zip-Code			
<136>	Telephone Number			
<137>	Fax Number			
<138>	Email Address			
				<u> </u>

(060) Co	verage and Performance Report	FCC Form 690 Ap groved by OMB OMB Control No. 3060-1185 Page 3 of 8
<010>	Study Area Code	278014
<015>	Study Area Name	Central Louisiana Cellular, LLC
<020>	Program Year	2017
<030>	Contact Name - Person USAC should contact regarding this data	Chad Strausbaugh
<035>	Contact Telephone Number - Number of person identified in data line <030>	6105356474 ext.

278014_CPRd_LA.zip

Coverage and Performace attachments

Coverage and Performance Report Year

<039>

<140>

<141>

Contact Telephone Number - Number of person identified in data line <030> 6105356474 ext.

Contact Email Address - Email Address of person identified in data line <030> cstrausbaugh@cellonenation.com

08/2016 - 07/2017

				Resident Population Newly Reached	Total Resident Population Reached by	Road Miles per Census	Road Miles per Census Block Newly	Total Road Miles covered per Census	Certify that Coverage and Performance data is uploaded (Yes/no)
State	County	Census Block	Census Block	by Service	Service	Block	Reached	Block	
			\$	ee attach	ed worksl	neet			

	0		0
Percentage of Total Population Reached by Service		Percentage of Total Road Miles covered by Service	

Page 4 of 8

<010>	Study Area Code	278014
<015>	Study Area Name	Central Louisiana Cellular, LLC
<020>	Program Year	2017
<030>	Contact Name - Person USAC should contact regarding this data	Chad Strausbaugh
<035>	Contact Telephone Number - Number of person identified in data line <030>	6105356474 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	cstrausbaugh@cellonenation.com

TO BE COMPLETED BY THE REPORTING CARRIER, IF THE REPORTING CARRIER IS FILING CERTIFICATION DATA ON ITS OWN BEHALF:

	eruncation of Officer or En	ployee as to Compliance with 47 CFR §54.1009(a)(4)		
I certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring compliance with 47 CFR §54.1009(a)(4), the information reported on this form and in any attachments is accurate.				
Name of Reporting Carrier: Cent	ral Louisiana Cellular, LL			
Signature of Authorized Officer:	CERTIFIED ONLINE	Date 06/28/2017		
Printed name of Authorized Officer:	Chad Strausbaugh			
Title or position of Authorized Officer:	Staff Counsel			
Telephone number of Authorized Officer:	6105356474 ext.			
Study Area Code of Reporting Carrier:	278014	Filing Due Date for this form: 07/03/2017		

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING CERTIFICATION DATA ON THE CARRIER'S BEHALF:

Certification of Officer or Employee to authorize an Agent to file Compliance with 47 CFR §54.1009(a)(4) on Behalf of Reporting Carrier			
I certify that (Name of Agent)			
	is authorized to submit the information reported on behalf of the reporting orting carrier; my responsibilities include ensuring compliance with 47 CFR §54.1009(a)(4) reported to the		
authorized agent; and, to the best of my knowledge, the reports	and data provided to the authorized agent is accurate		
Name of Authorized Agent:	and the second s		
Name of Reporting Carrier:			
Signature of Authorized Officer or Employee:	Date:		
Printed name of Authorized Officer or Employee:	- Julie.		
Title or position of Authorized Officer or Employee:			
Telephone number of Authorized Officer or Employee:			
Study Area Code of Reporting Carrier:	Filing Due Date for this form:		
Persons willfully making false statements on this form can be pun unc	nished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment der Title 18 of the United States Code, 18 U.S.C. § 1001.		

TO BE COMPLETED BY THE AUTHORIZED AGENT:

Certification of Agent Authoriz	to File Compliance with 47 CFR §54.1009(a)(4) on Behalf of Reporting Carrier
I, as agent for the reporting carrier, certify that I am author data provided by the reporting carrier; and, to the best of n	d to submit the certification on behalf of the reporting carrier; I have provided the data reported herein based or knowledge, the information reported herein is accurate.
Name of Reporting Carrier:	
Name of Authorized Agent Firm:	
Signature of Authorized Agent or Employee of Agent:	Date:
Name of Authorized Agent Employee:	
Title or position of Authorized Agent or Employee of Agent	
Telephone number of Authorized Agent or Employee of Ager	
Study Area Code of Reporting Carrier:	Filing Due Date for this form:
Persons willfully making false statements on this form can	punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

(08 0) Tel	bal Lands Reporting				FCC Form 690 Approved by OMB OMB Control No. 3060-1185 Page 5 of 8
<010>	Study Area Code		278014		
<015>	Study Area Name		Central Louisian	a Cellular, LLC	
<020> <030>			2017		
<035>	The state of the s	this data	Chad Strausbaugh		
<039>	Tourist of person recriti	fied in data line	<030>		
<142>			cstrausbauqh@cel	lonenation.com	
<143>	County				
<144>	Tribal Land(s) on which ETC Serves				
<145>	Tribal Government Engagement Obligation	Name of Attached	f Document (.pdf)		
	If your company serves Tribal lands, please select (Yes, Neach of these boxes to confirm the status described on t PDF, on line 145, demonstrates coordination with the Togovernment pursuant to § 54.1004 includes:	he attached	le) for		
<146>	Needs assessment and deployment planning with a focu	ıs on Tribal	Select (Yes, No, Not Applicable)		
	community anchor institutions;	AS OIT TITU di			
<147>	Feasibility and sustainability planning;			1	
<148>	Marketing services in a culturally sensitive manner;				
<149>	Compliance with Rights of way processes				•
<150>	Compliance with Land Use permitting requirements				
<151>	Compliance with Facilities Siting rules				
<152>	Compliance with Environmental Review processes				
<153>					
	Compliance with Cultural Preservation review processes				
<154>	Compliance with Tribal Business and Licensing requireme	ents.	1		

(090) Project	Update information	FCC Form 690 Approved by OMB OMB Control No. 3060-1185 Page 6 of 8
<010> <015> <020> <030> <035> <039>	Study Area Code Study Area Name Program Year Contact Name - Person USAC should contact regarding this data Contact Telephone Number - Number of person identified in data line <030> Contact Email Address - Email Address of person identified in data line <030>	278014 Central Louisiana Cellular, LLC 2017 Chad Strausbaugh 6105356474 ext. cstrausbaugh@cellonenation.com
<200> <201> <202> <203>	Date Authorized to Receive Support Targeted Completion Date Total Mobility Fund Support Awarded Total Mobility Fund Support Disbursed	08/08/2013 08/09/2015 108738.00 100256.44
<210> <211>	Actual Completion Date Project Status Description (attached)	07/08/2015 278014_PSD_LA.pdf
<212><213><214><215><216><217>	Please check these boxes below to confirm that the attached PDF, on line 211, contains a project status pursuant to §54.1005(b)(2)(v). The information shall be submitted as appropriate. Status of Network Deployment - Network Design Status of Network Deployment - Construction Status of Network Deployment - Deployment Status of Network Deployment - Maintenance Project Budget Status Project Plan Status	{Name of PDF attached}

⊙ 3G **○** 4G

<218> Network will Support 3G/4G Mobile Service ?

(101) Certification - Reporting Carrier	FCC Form 690 Approved by OMB
	OMB Control No. 3060-1185 Page 7 of 8

<010>	Study Area Code	278014
<015>	Study Area Name	Central Louisiana Cellular, LLC
<020>	Program Year	2017
<030>	Contact Name - Person USAC should contact regarding this data	Chad Strausbaugh
<035>	Contact Telephone Number - Number of person identified in data line <030>	6105356474 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	cstrausbaugh@cellonenation.com

TO BE COMPLETED BY THE REPORTING CARRIER, IF THE REPORTING CARRIER IS FILING ON ITS OWN BEHALF:

l certify that I am an officer of the reporting carrier; my responsibilities include ensuring the accuracy of the reporting requirements for Mobility Fund recipients; and, to the best of my knowledge, the information reported on this form and in any attachments is accurate.			
Name of Reporting Carrier: Centr	al Louisiana Cellular, LLC		
Signature of Authorized Officer:	CERTIFIED ONLINE		Date 06/28/2017
Printed name of Authorized Officer:	Chad Strausbaugh		
Title or position of Authorized Officer:	Staff Counsel	•	
Telephone number of Authorized Office	6105356474 ext.		
Study Area Code of Reporting Carrier:	278014	Filing Due Date for this form: 07/03/2017	

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

(102) Certification - Agent / Carrier	FCC Form 690 Approved by OMB
	OMB Control No. 3060-1185 Page 8 of 8

<010>	Study Area Code	278014
<015>	Study Area Name	Central Louisiana Cellular, LLC
<020>	Program Year	2017
<030>	Contact Name - Person USAC should contact regarding this data	Chad Strausbaugh
<035>	Contact Telephone Number - Number of person identified in data line <030>	6105356474 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	cstrausbaugh@cellonenation.com

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING ON THE CARRIER'S BEHALF:

Certification of Officer to Authorize an Agent to File for Mobility Fund Recipients on Behalf of Reporting Carrier				
I certify that (Name of Agent)_ also certify that I am an officer of the reporting carrier; m agent; and, to the best of my knowledge, the reports and	is authorized to submit the information reported on behalf of the responsibilities include ensuring the accuracy of the data reporting requirements provided to the a lata provided to the authorized agent is accurate.	e reporting carrier. I authorized		
Name of Authorized Agent:				
Name of Reporting Carrier:				
Signature of Authorized Officer:	Date:			
Printed name of Authorized Officer:				
Title or position of Authorized Officer:				
Telephone number of Authorized Officer:				
Study Area Code of Reporting Carrier:	Filing Due Date for this form:			
Persons willfully making false statements on this form car	be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisunder Title 18 of the United States Code, 18 U.S.C. § 1001.	sonment		

TO BE COMPLETED BY THE AUTHORIZED AGENT:

alf of the reporting carrier; I have provided the data rted herein is accurate.
Date:

Attachments

<010>	Study Area Code	278014
<015>	Study Area Name	Central Louisiana Cellular, LLC
<020>	Program Year	2017
<030>	Contact Name - Person USAC should contact regarding this data	Chad Strausbaugh
<035>	Contact Telephone Number - Number of person identified in data line <030>	6105356474 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	cstrausbaugh@cellonenation.com
<140>	Coverage and Performance Report Year	08/2016 - 07/2017

<141>

<a1></a1>	<62>	<93>	shio	¢625	<b3></b3>	<e1></e1>	402>	*C3>	
State	County Sabine	Census Block	Resident Population per Census Błock	Resident Population Newly Reached by Service	Total Resident Population Reached by Service	Road Miles per Census Block	Road Miles per Census Block Newly Reached	Total Road Miles covered per Census Block	Certify that Coverage and Performacne data is uploaded (yes/no)
LA	Sabine	0000	0	0	0	0.0	0.0	0.0	Yes
			-					-	
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Percentage of		
Total Population		
Reached by		
Service		

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Percentage of Total Road Miles covered by Service

0			

Central Louisiana Cellular, LLC Form 690 – Annual Report for August 2016 – July 2017

FCC Form 690 - Coverage and Performance Data Update

Central Louisiana Cellular, LLC has completed the coverage/performance testing for this SAC, which is reported in its Payment Request 3 submitted for this SAC.

Central Louisiana Cellular, LLC Form 690 – Annual Report for August 2016 – July 2017

Project Status Description

Item: SAC 278014

County/State: Sabine, LA

Total Award Amount: \$108,738.00

Project Description

To date, Central Louisiana Cellular, LLC has completed construction, and deployed its network in at least 75% of the eligible road miles associated with this SAC. There are no further material updates with respect to network design, construction, deployment and maintenance associated with this SAC.

4/01/2022/4//402	Fund - \$54.1009 Annual Reporting lection Form		Avg. Burde	FCC Form Approved by OMB OMB 3060-1185 in Estimate per Respondent: 18 Hours
<010>	Study Area Code	278015		
<015>	Study Area Name	Central Louisiana Cellular, LLC	Ace	cepted / Filed
<020>	Program Year	2017		
<030>	Contact Name: Person USAC should contact with questions about this data	Chad Strausbaugh		JUN 292017
<035>	Contact Telephone Number: Number of the person identified in data line <030>	6105356474 ext.		Communications Commission Office of the Secretary
<039>	Contact Email: Email of the person identified in data line <030>	cstrausbaugh@cellonenation.com		
<039>		cstrausbaugh@cellonenation.com	M8481118841111814884111741888	
<039> <040>			1) <040> 🔘	•
	Email of the person identified in data line <030>	been provided with a Form 481 filing (Y/N	1) <040> O <041>	•
	Email of the person identified in data line <030> Has the information required pursuant to \$54.1009	been provided with a Form 481 filing (Y/Ned with the Form 481 reporting		

Notice to Individuals Required by the Paperwork Reduction Act of 1995

OMB Control Number 3060-1185 (Annual Report for Mobility Fund Phase I Support, FCC Form 690 and Record Retention Requirements) Notice to Individuals Required by the Paperwork Reduction Act of 1995

Public reporting burden for this collection of information is estimated to average 18 hours per response. Our estimate includes the time to read the instructions, look through existing records, gather and maintain required data, and actually complete and review the form or response. If you have any comments on this estimate, or on how we can improve the collection and reduce the burden it causes you, please write the Federal Communications Commission, Office of Managing Director, AMD-PERM, Washington, DC 20554, Paperwork Reduction Act Project (3060-1185). Please DO NOT SEND COMPLETED FORMS TO THIS ADDRESS. You are not required to respond to a collection of information sponsored by the Federal government, and the government may not conduct or sponsor this collection, unless it displays a currently valid OMB control number and/or we fail to provide you with this notice. This collection has been assigned an OMB control number of 3060-1185.

THIS NOTICE IS REQUIRED BY THE PAPERWORK REDUCTION ACT OF 1995, PUBLIC LAW 104-13, OCTOBER 1, 1995, 44 U.S.C. SECTION 3507.

(050) Car	rier Contact Form		FCC Form 690
			Approved by OMB
			OMB Control No. 3060-1185
10H441112511118H64H47.			Page 2 of 8
<010>	Study Area Code	278015	
<015>	Study Area Name	Central Louisiana Cellular, LLC	
<020>	Program Year	2017	
<030> <035>	Contact Name - Person USAC should contact regarding the	is data Chad Strausbaugh	
<039>	Contact Telephone Number - Number of person identifie Contact Email Address - Email Address of person identifie	d in data line <020>	
	Some of their Address Email Address of person definite	u iii data iiie \050/ cstrausbaugh@cellonenation.com	
Reporting	Carrier / Mobility Fund Phase 1 Winning Bidder		
<110>	FCC Registration Number	20165593	
<111>		Central Louisiana Cellular, LLC	
<112>	Winning Didder Consist No.	Central Louisiana Cellular, LLC	
<113>	Chroat Address (as DO Dass)	170 Devon Park Drive, Suite 104	
<114>		Vayne	
<115>	State		
<116>	7in C1-	PA	
<117>	Telephone Number	.9087	
<118>	Fax Number	105356474 ext.	
<119>	Email Address	106885209	
11132		strausbaugh@cellonenation.com	
Contact In	<u>formation</u>		
	if same as above, indicate in this box		
<120>	Name (First, MI, Last, Suffix)	had Strausbaugh	
<121>	Filing Carrier Name	entral Louisiana Cellular, LLC	
<122>	Street Address (or PO Box)	170 Devon Park Drive, Suite 104	
<123>	City	ayne	
<124>	State	A.	
<125>	Zip-Code 1	9087	
<126>	Telephone Number	105356474 ext.	
<127>	Fav Number		
<128>	Email Address	106885209	
	<u></u>	strausbaugh@cellonenation.com	
Authorized	d Agent Information		
	if no agent, indicate in this box		
<130>	Name (First, MI, Last, Suffix)		
<131>	Company		
<132>	Street Address (or PO Box)		-
<133>	City		
<134>	State		
<135>	Zip-Code		
<136>	Telephone Number		
<137>	Fax Number		
<138>	Email Address		
-1302			

(060) Cov	erage and Performance Report		FCC Form 690 Ap proved by QMB QMB Control No. 3060-1185 Page 3 of 8
<010>	Study Area Code	278015	
<015>	Study Area Name	Central Louisiana Cellular, LLC	· · · · · · · · · · · · · · · · · · ·
<020>	Program Year	2017	
<030>	Contact Name - Person USAC should contact regarding this data	Chad Strausbaugh	
<035>	Contact Telephone Number - Number of person identified in data line <030>	6105356474 ext.	
:039>	Contact Email Address - Email Address of person identified in data line <030>	cstrausbaugh@cellonenation.com	
:140>	Coverage and Performance Report Year 08/2016 - 07/2017		
	278015 CPRd	I.A. zin	

Coverage and Performace attachments

<141> <83> <61> <62> <63> <61> <62> Total Road Road Certify that Road Miles per Miles Coverage and Resident Total Resident Miles Census covered Performance data Resident Population Population per Block per is uploaded Population per Newly Reached Reached by Census Newly Census (Yes/no) State County Census Block Census Block by Service Service Block Reached Block -- See attached worksheet

,	0		0
Percentage of Total		Percentage of Total	
Population Reached by		Road Miles covered	
Service		by Service	

(070) Urban Rate Comparability Certification Compilance	
PCCF	orm 690
Appro	ved by OMB
in the first of th	Control No. 3060-1185
Page	of 8

_<010>	Study Area Code	278015
<015>	Study Area Name	Central Louisiana Cellular, LLC
<020>	Program Year	2017
<030>	Contact Name - Person USAC should contact regarding this data	Chad Strausbaugh
<035>	Contact Telephone Number - Number of person identified in data line <030>	6105356474 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	cstrausbaugh@cellonenation.com

TO BE COMPLETED BY THE REPORTING CARRIER, IF THE REPORTING CARRIER IS FILING CERTIFICATION DATA ON ITS OWN BEHALF:

Certification of Officer or Employee as to Compliance with 47 CFR §54.1009(a)(4)								
I certify that I am an officer or employee of form and in any attachments is accurate.	the reporting carrier; my responsib	ilities include ensuring compliance with 47 CFR §54.1009(a)(4), the information reported	on this					
Name of Reporting Carrier: Cent	ral Louisiana Cellular, LLC							
Signature of Authorized Officer:	CERTIFIED ONLINE	Date 06/28/2017						
Printed name of Authorized Officer:	Chad Strausbaugh							
itle or position of Authorized Officer:	Staff Counsel							
elephone number of Authorized Officer:	6105356474 ext.							
study Area Code of Reporting Carrier:	278015	Filing Due Date for this form: 07/03/2017						

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING CERTIFICATION DATA ON THE CARRIER'S BEHALF:

r ceruity triat (Name of Agent)	an Agent to file Compliance with 47 CFR §54.1009(a)(4) on Behalf of Reporting Carrier —————————————————————————————————
Name of Authorized Agent:	
Name of Reporting Carrier:	
Signature of Authorized Officer or Employee:	Data
Printed name of Authorized Officer or Employee:	Date:
Title or position of Authorized Officer or Employee:	
Telephone number of Authorized Officer or Employee:	
Study Area Code of Reporting Carrier:	Filing Due Date for this form:
Persons willfully making false statements on this form can be punis under	thed by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment r Title 18 of the United States Code, 18 U.S.C. § 1001.

TO BE COMPLETED BY THE AUTHORIZED AGENT:

Certification of Agent Authoriz	ed to File Compliance with 47 CFR §54.1009(a)(4) on Behalf of Reporting Carrier
I, as agent for the reporting carrier, certify that I am authori data provided by the reporting carrier; and, to the best of m	zed to submit the certification on behalf of the reporting carrier; I have provided the data reported herein based only knowledge, the information reported herein is accurate.
Name of Reporting Carrier:	
Name of Authorized Agent Firm:	
Signature of Authorized Agent or Employee of Agent: Name of Authorized Agent Employee:	Date:
itle or position of Authorized Agent or Employee of Agent	
elephone number of Authorized Agent or Employee of Agen	t:
itudy Area Code of Reporting Carrier:	Filing Due Date for this form:
	Filing Due Date for this form: be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

(080) Trib	al Lands Reporting			. 1 () d ∫ A	CC Form 690 pproved by OMB MB Control No. 3060-1185	
					age 5 of 8	
<010>	Study Area Code		278015			
<015>	Study Area Name		Central Louisiana	Cellular, LLC		
<020>	Program Year	.1.4.1.	2017			
<030> <035>	Contact Name - Person USAC should contact regarding Contact Telephone Number - Number of person identif	this data	Chad Strausbaugh			
<039>	Contact Telephone Number - Number of person identified in data line <030> Contact Email Address - Email Address of person identified in data line <030>			onenatic		
<142>	State		CSCI AUSDAUGN@CEII	OMERATION, COM	_	
<143>	County					
				· · · · · · · · · · · · · · · · · · ·		
<144>	Tribal Land(s) on which ETC Serves					
<145>	Tribal Government Engagement Obligation	Name of Attached	Document (.pdf)			
	If your company serves Tribal lands, please select (Yes, No, Not Applicable) for each of these boxes to confirm the status described on the attached PDF, on line 145, demonstrates coordination with the Tribal government pursuant to § 54.1004 includes:					
<146>	Needs assessment and deployment planning with a foc community anchor institutions;	us on Tribal	Select (Yes, No, Not Applicable)			
<147>	·					
<148>	Feasibility and sustainability planning; Marketing services in a culturally sensitive manner;					
<149>	Compliance with Rights of way processes					
	Compliance with Land Use permitting requirements					
	Compliance with Facilities Siting rules					
	Compliance with Environmental Review processes					
<153>	Compliance with Cultural Preservation review processes					

<154> Compliance with Tribal Business and Licensing requirements.